



ecology and environment, inc.

FAIRWAY WEST OFFICE BLDG., 4350 SHAWNEE MISSION PARKWAY, SHAWNEE MISSION, KS 66205, TEL. 913-432-9961

International Specialists in the Environment

TO: Paul Doherty, ARPO
FROM: Dave Tyson, EE/FIT
THRU: Deborah Kopsick, ARM, EE/FIT
DATE: September 26, 1986

Site:	Wikel Mfg Co
ID #:	MOD 981704901
Break:	1.5
Other:	9-26-86

SUBJECT: Telephone survey of facilities thought to handle asbestos or products containing asbestos
TDD # R-07-8601-06

In support of TDD # R-07-8601-06, WIKEL MANUFACTURING CO. INC. was contacted by telephone to determine if they currently use asbestos or had used it in the past at their facility. This letter report identifies this facility as not having handled or disposed of raw asbestos, but has handled products containing asbestos in a bound form.

I. SITE IDENTIFICATION

Site name: WIKEL MANUFACTURING CO. INC.
Address: 9722 REAVIS PARK DRIVE, ST. LOUIS, MO 63123
Current phone number: (314)464-0788
Owner/Operator of site: WIKEL MANUFACTURING CO.
Person Contacted : MIKE ROWDEN
Date contacted by phone: 04/30/86 Investigator: D. TYSON

Based on the available information, it is our recommendation that NO ADDITIONAL WORK is warranted at this site since they maintain that they do not currently use asbestos and although they have distributed products containing asbestos, they have not used or disposed of asbestos in the past.

EPA Forms 2070-8 and 2070-12 (Part 1) have been included with this report along with a copy of the original telephone survey form.



POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION

REGION

SITE NUMBER

MO D

981704901

NOTE: The initial identification of a potential site or incident should not be interpreted as a finding of illegal activity or confirmation that an actual health or environmental threat exists. All identified sites will be assessed under the EPA's Hazardous Waste Site Enforcement and Response System to determine if a hazardous waste problem actually exists.

A. SITE NAME

Wikel Manufacturing Co. Inc.

B. STREET (or other identifier)

9722 Reavis Park Drive

C. CITY

St. Louis

D. STATE

Missouri

E. ZIP CODE

63123

F. COUNTY NAME

St. Louis City

G. OWNER/OPERATOR (if known)

1. NAME

Wikel Mfg. Co. Inc. (Pevely, MO) Mike Rowden
Sandusky, Ohio (Plant) Acting Plant Mngr.

2. TELEPHONE NUMBER

NA

H. TYPE OF OWNERSHIP (if known)



1. FEDERAL



2. STATE



3. COUNTY



4. MUNICIPAL



5. PRIVATE



6. UNKNOWN

I. SITE DESCRIPTION

Former warehouse used for the distribution of products from the Wikel Mfg. Co. plant in Pevely, MO. Warehouse shut down in 1983. Warehouse had 1 employee when in operation. Plant in Pevely still in operation, see site report #23.

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)

TSCA identified as original NESHAPs site

K. DATE IDENTIFIED

(mo., day, & yr.)

Unknown

L. SUMMARY OF POTENTIAL OR KNOWN PROBLEM

When in operation, this warehouse distributed products which contained asbestos. No manufacturing or packaging at this location ever occurred.

M. PREPARER INFORMATION

1. NAME

David A. Tyson

E&E/FIT

2. TELEPHONE NUMBER

(913)432-9961

3. DATE (mo., day, & yr.)

4/30/86

NOV 03 1986

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POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

D1 STATE D2 SITE NUMBER
MO 981704901

II. SITE NAME AND LOCATION

D1 SITE NAME (Legal, common, or descriptive name of site) Wikel Manufacturing Co., Inc.		D2 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 9722 Reavis Park Drive			
D3 CITY St. Louis	D4 STATE MO	D5 ZIP CODE 63123	D6 COUNTY St. Louis	D7 COUNTY CODE	D8 CONG DIST
D9 COORDINATES LATITUDE Unknown	LONGITUDE Unknown				
D10 DIRECTIONS TO SITE (Starting from nearest public road) Unknown					

III. RESPONSIBLE PARTIES

D1 OWNER (If known) Wikel Manufacturing Co., Inc.		D2 STREET (Business, making, residential) 9722 Reavis Park Drive			
D3 CITY Sandusky	D4 STATE OH	D5 ZIP CODE	D6 TELEPHONE NUMBER ()		
D7 OPERATOR (If known and different from owner) Mike Rowden		D8 STREET (Business, making, residential) 9722 Reavis Park Drive			
D9 CITY St. Louis	D10 STATE MO	D11 ZIP CODE 63123	D12 TELEPHONE NUMBER ()		
D13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A PRIVATE <input type="checkbox"/> B FEDERAL (Agency name) <input type="checkbox"/> C STATE <input type="checkbox"/> D COUNTY <input type="checkbox"/> E MUNICIPAL <input type="checkbox"/> F OTHER (Specify) <input type="checkbox"/> G UNKNOWN					
D14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A RCRA 3001 DATE RECEIVED / / MONTH DAY YEAR <input type="checkbox"/> B UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED / / MONTH DAY YEAR <input checked="" type="checkbox"/> C NONE					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

D1 ON SITE INSPECTION <input type="checkbox"/> YES DATE / / MONTH DAY YEAR <input checked="" type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A EPA <input checked="" type="checkbox"/> B EPA CONTRACTOR <input type="checkbox"/> C STATE <input type="checkbox"/> D OTHER CONTRACTOR <input type="checkbox"/> E LOCAL HEALTH OFFICIAL <input type="checkbox"/> F OTHER (Specify) CONTRACTOR NAME(S) Ecology & Environment, Inc. (FIT)			
D2 SITE STATUS (Check one) <input checked="" type="checkbox"/> A ACTIVE <input type="checkbox"/> B INACTIVE <input type="checkbox"/> C UNKNOWN		D3 YEARS OF OPERATION BEGINNING YEAR ENDING YEAR <input checked="" type="checkbox"/> UNKNOWN			

D4 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

When in operation, this company location was a distribution center for materials containing asbestos.

D5 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

The main hazard associated with handling asbestos containing materials is the possibility of airborne releases of the asbestos fibers.

V. PRIORITY ASSESSMENT

D1 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A HIGH (Inspection required promptly) <input type="checkbox"/> B MEDIUM (Inspection required) <input type="checkbox"/> C LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D NONE (No further action needed; complete current disposition form)			
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VI. INFORMATION AVAILABLE FROM

D1 CONTACT Paul Doherty	D2 OF (Agency/Organization) EPA/ENSV		D3 TELEPHONE NUMBER (913)236-3888	
D4 PERSON RESPONSIBLE FOR ASSESSMENT David A. Tyson	D5 AGENCY E&E	D6 ORGANIZATION FIT	D7 TELEPHONE NUMBER (913)432-9961	D8 DATE 04/30/86 MONTH DAY YEAR

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#54

DATE: 4/30/86

Interviewer: Dave Tyson

TELEPHONE CONVERSATION RECORD
POTENTIAL ASBESTOS SITE

I. SITE IDENTIFICATION

Site Name: Wikel Manufacturing Co. Inc.
City: St. Louis State: MOStreet: 9722 Reavis Park Drive
Zip: 63123 County: N/AOwner/Operator: Wikel Manufacturing Co. Inc.
Sandusky, OhioType of Owner: Federal State County Munic. Priv. Unknown

Person Talked to: Mike Rowden

Title: Acting
Plant
Manager (At Pevely, MO
Facility)

II. SITE INFORMATION

Present user Asbestos: Y N ? Past User Asbestos: Y N ?Manufacturer: Y N ? Secondary User: Y N ?Process Type: Mining Milling Manufacturing Construction
Removal Other: Warehouse (For Distribution)Description of Business: Products manufactured at Pevely plant and
then brought to this warehouse, packaged in containers for later distribution.
Warehouse discontinued (shut down) in 1983. Presently, plant in Pevely, MO (St. Louis)
still in operation. (See #23) Warehouse had only 1 employee when in operation.

III. PREVIOUS INSPECTION HISTORY

Previous Site Inspection: Y N ?

Type of Inspection: On-site or Telephone

Who Inspected them: Federal State County City Other

Date Inspected: Inspector:

IV. ASBESTOS WASTE HANDLING CONSIDERATIONS

Type of Asbestos: Friable/Non Friable, Asphalt Matrix, Old Siding or others:

N/A Type of Waste: Asbestos Waste ; Scraps or Debris ;
Equipment ; Bags or Containers ; Contaminated Clothing ;
Other:

Disposal Methods: N/A

Disposal Site:

V. PREVIOUS OWNERSHIP HISTORY (ASBESTOS RELATED)

Site Name: N/A

Owner/Operator:

Telephone:

VI. PRELIMINARY ASSESSMENT RECOMMENDATION

Warranted

Unwarranted

Insufficient Data

No
waste
generated



POTENTIAL HAZARDOUS WASTE SITE
FINAL STRATEGY DETERMINATION

REGION SITE NUMBER

MOD 981704901

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency, Site Tracking System; Hazardous Waste Enforcement Task Force (EN-JJ5), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME

WIKEL MANUFACTURING CO.

B. STREET

9722 REAVIS PARK DR

C. CITY

ST LOUIS

D. STATE

MO

E. ZIP CODE

63123

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED		X			
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE (If yes, complete Section III.)					
C. REMEDIAL ACTION (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR FINAL STRATEGY DETERMINATION Site identified as a potential Asbestos site as result of TSCA Notification program and NESHAPS identification programs. Telephone survey of site owner/operator and information from TSCA/NESHAPS programs was used to prepare Site ID form and Preliminary Assessment. Site ~~has~~ does not currently use asbestos nor has asbestos been used or disposed of on-site in the past.

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.)

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME

Peter Schuler

2. TELEPHONE NUMBER

918-236-2856

3. DATE (mo., day, & yr.)

III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
D. TOTAL ESTIMATED COST	\$	

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